01/03/01

Return Receipt Postcard (MPEP 503)

Certified Copy of Priority Document(s)

Statement filed in prior application,

Status still proper and desired

43,325

Date

(Should be specifically itemized)

(if foreign priority is claimed)

\* Small Entity

Statement(s)

(PTO/S8/09-12)

Registration No. (Attorney/Agent)

Other:

Please type a plus sign (+) inside this box	to respon	PTO/SB/05 ( Approved for use through 09/30/2000. OMB 0651- Patent and Trademark Office: U.S. DEPARTMENT OF COMM ond to a collection of information unless it displays a valid OMB control nu	-0032
UTILITY	Attorne	ney Docket No.	_
PATENT APPLICATION	First In	Inventor or Application Identifier Zijje Wang	٠
TRANSMITTAL	Title	UNFOLDING APPARATUS FOR FOLDAR	N.E.
(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))	Expres	ess Mail Label No. EL667665030US	35
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents		Assistant Commissioner for Patents ADDRESS TO: Box Patent Application. Washington, DC 20231	JC71
Fee Transmittal Form (e.g., PTO/SB/17)  (Submit an original and a duplicate for fee processing)		5. Microfiche Computer Program (Appendix)	
2. X Specification [Total Pages 1 1 1 (preferred arrangement set forth below)	]1 -	<ol> <li>Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</li> </ol>	
- Descriptive title of the Invention		a. Computer Readable Copy	
- Cross References to Related Applications - Statement Regarding Fed sponsored R & D		b. Paper Copy (identical to computer copy)	
- Reference to Microfiche Appendix		c. Statement verifying identity of above copies	i
- Background of the Invention - Brief Summary of the Invention.		ACCOMPANYING APPLICATION PARTS	
Brief Description of the Drawings (if filed)		7. X Assignment Papers (cover sheet & document(s))	
- Detailed Description - Claim(s)	·	8. 37 C.F.R.§3.73(b) Statement Power of (when there is an assignee) Attorney	
- Claim(s)  - Abstract of the Disclosure		9. English Translation Document (if applicable)	
3. X Drawing(s) (35 U.S.C. 113) [Total Sheets 5	]1	10. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations	
4. Oath or Declaration [Total Pages 2	7, 1	11. Preliminary Amendment	

12.

[Total Pages

Copy from a prior application (37 C.F.R. § 1.63(d))

Signed statement attached deleting

inventor(s) named in the prior application,

see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

(for continuation/divisional with Box 16 completed)

DELETION OF INVENTOR(S)

Newly executed (original or copy)

\* NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment							
Continuation Divisional Continuation-in-part (CIP) of prior application No:/							
Prior application information: Examiner Group / Art Unit:							
For CONTINUATION of DIVISIONAL APPS only: The entire disclosure of the prior application, from which an eath or declaration is supplied							
under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.							
17. CORRESPONDENCE ADDRESS							
☐ Custom	er Number or Bar Code Label				nanandanan addanan balawa		
Customer Number or Bar Code Label   or LX   Correspondence address below   (Insert Customer No. or Attach bar code label here)							
The state of the s							
Name	Name Wei Te (Joseph) Chung						
	Foxconn International, Inc.						
1650 Memoray Priva							
Address	1	<del></del>					
2.5	- · ·			1			
City	Santa Clara	State	CA	Zip Code	95050		
Country	U.S.A.	Telephone	(408)919-6	137   Fax			

Burden Hour Statement: This form is estimated to take Manuse to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are equired to complete this form should be sent to the Chief Information Officer. Patent and Trademark Office. Washington, DC 20231. DO NOT SENS FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Name (Print/Type)

Signature

PTO/SB/17 (2/98)
Approved for use through 9/30/2000. CMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

	Complete if Known			
FEE TRANSMITTAL	Application Number			
Patent fees are subject to annual revision on October 1.	Filing Date			
These are the fees effective October 1, 1997.	First Named Inventor Zijie Wang			
Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.	Examiner Name			
See 37 C.F.R. §§ 1.27 and 1.28.	Group / Art Unit			
TOTAL AMOUNT OF PAYMENT (\$) 830.00	Attorney Docket No.			

METHOD OF PAYMENT (check one)	F	EE CALCULATION (continued)				
The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:  Deposit	3. ADDITIONAL FE Large Entity Small Entity Fee Fee Fee Fee Code (\$) Code (\$)		F <del>ee</del> Paid			
Account Number	105 130 205 85	Surcharge - late filling fee or cath				
Deposit Account	127 50 227 25	Surcharge - late provisional filling fee or cover sheet.				
Name Charge Any Additional Charge the Issue Fee Set in	139 130 139 130	Non-English specification				
Fee Required Under 37 C.F.R. § 1.18 at the Mailing 37 C.F.R. § 1.16 and 1.17 of the Notice of Allowance	147 2,520 147 2,520	For filling a request for reexamination				
3. 33 1.10 4.4 1.17	112 920 112 920	Requesting publication of SIR prior to Examiner action				
2. Payment Enclosed: -  Check Order Other	113 1,840* 113 1,840*	Requesting publication of SIR after Examiner action				
- Oldar	115 110 215 55	Extension for reply within first month				
FEE CALCULATION	116 400 216 200	Extension for reply within second month				
1. BASIC FILING FEE	117 950 217 475	Extension for reply within third month				
Large Entity Small Entity Fee Fee Fee Fee Paid	118 1,510 218 755	Extension for reply within fourth month				
Code (\$) Code (\$)	128 2,060 228 1,030	Extension for reply within fifth month				
101 790 201 395 Utility filing fee 710	119 310 219 155	Notice of Appeal				
108 330 208 165 Design filing fee	120 310 220 155	Filing a brief in support of an appeal				
107 540 207 270 Plant filling fee	121 270 221 135	Request for oral hearing Petition to institute a public use proceeding				
108 790 208 395 Reissue filling fee	138 1,510 138 1,510	Petition to revive - unavoidable				
114 150 214 75 Provisional filling fee SUBTOTAL (1) (\$) 710 00	140 110 240 55	Petition to revive - unintentional				
	141 1,320 241 680	Utility issue fee (or reissue)	<del></del>			
2. EXTRA CLAIM FEES	142 1,320 242 860 143 450 243 225	Design issue fee				
Extra Claims below Fee Paid  Total Claims 18 -20 = 0 X 18 = 0	i	Plant issue fee				
Independent 1 2 80 - 80	122 130 122 130	Petitions to the Commissioner	<del> </del>			
Claims 4 Solution August Augus		Petitions related to provisional applications				
or number previously paid, if greater, For Reissues, see below	128 240 126 240	Submission of Information Disclosure Stmt				
Large Entity Small Entity  Fee Fee Fee Fee Fee Description  Code (\$) Code (\$)	581 40 581 40	Recording each patent assignment per property (times number of properties)	40			
103 22 203 11 Claims in excess of 20	146 790 246 395	Filling a submission after final rejection				
102 82 202 41 Independent claims in excess of 3		(37 ČFR 1.129(a)) For each additional invention to be				
104 270 204 135 Multiple dependent claim, if not paid		examined (37 CFR 1.129(b))				
109 82 209 41 Reissue independent claims over original patent	Other fee (specify)					
110 22 210 11 ™ Reissue claims in excess of 20 and over original patent	Other fee (specify)					
SUBTOTAL (2) (\$) 80.00	*Reduced by Basic Filing Fo	ee Paid SUBTOTAL (3) (\$) 4 (	0.00			
SUBMITTED BY Complete (if applicable)						
Typed or		Reg. Number	3,325			
Printed Name Wei Te Chung		4.	<del>,,,,,,</del>			

Signature

Date of User ID

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of this you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, OC 10231. DO NOT SEND FEES ON COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, OC 20331.